ORIGINAL SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM 11-K

Received SEC

JUN 1 9 2009

(Mark	(One) Washington, DC 20349
\boxtimes	ANNUAL REPORT PURSUANT TO SECTION 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934
	For the fiscal year ended December 31, 2008
	OR
	TRANSITION REPORT PURSUANT TO SECTION 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934
	For the transition period from to
Com	mission file number: 000-51367
A.	Full title of the plan and the address of the plan, if different from that of the issuer named below:
	Ottawa Savings Bank Employees' Savings & Profit Sharing Plan and Trust
B.	Name of issuer of the securities held pursuant to the plan and the address of its principal executive office:
	Ottawa Savings Bancorp, Inc. 925 LaSalle Street Ottawa, Illinois 61350

REQUIRED INFORMATION

- 1. Not applicable.
- 2. Not applicable.
- 3. Not applicable.
- 4. The Ottawa Savings Bank Employees' Savings & Profit Sharing Plan and Trust (the "Plan"), is subject to the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA"). Pursuant to Section 103(c) of ERISA and the regulations thereunder, the Plan is not required to file audited financial statements because the Plan has fewer than 100 participants. Attached hereto as Appendix I is a copy of the Plan's Summary Annual Report and Schedule I to the Form 5500.

APPENDIX I FORM 5500 SCHEDULE I AND SUMMARY ANNUAL REPORT

SCHEDULE I (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Financial Information -- Small Plan

This schedule is required to be filed under Section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

File as an attachment to Form 5500.

Official Use Only

OMB No. 1210-0110

2008

This Form is Open to Public Inspection.

	ension Benefit Guaranty Corporation						Pt	iblic Inspection.
	alendar year 2008 or fiscal plan year beginning		and endin	g				
	lame of plan			В	Thre	e-digit		
OTI	AWA SAVINGS BANK EMPLOYEES' SAVINGS &	PROFIT SHA	1		plan	numbe	er 🕨	00
C F	Plan sponsor's name as shown on line 2a of Form 5500			D	Emp	loyer	dentific	ation Number
TTO	AWA SAVINGS BANK			<u> </u>				36-158874
Com	plete Schedule I if the plan covered fewer than 100 participants as	s of the beginning	of the plan year.	You	may	also co	mplete	Schedule I if you
are fi	ling as a small plan under the 80-120 participant rule (see instruc-	tions). Complete 5	schedule H if repo	ortin	g as	large	plan or	OFE.
Pa	Small Plan Financial Information	ing the second second	<u></u>					<u> , iano minjamba karanga mananga manang</u>
Repo	ort below the current value of assets and liabilities, income, expens	ses, transfers and	changes in net a	sset	s duri	ng the	plan ye	ar. Combine the
value	of plan assets held in more than one trust. Do not enter the value	e of the portion of	an insurance cor	ntrac	t that	guarar	itees di	ıring this plan year to
pay a	a specific dollar benefit at a future date. Include all income and ex	penses of the plai	including any tri	ust(s	s) or s	eparat	ely mair	tained fund(s) and
any p	payments/receipts to/from insurance carriers. Round off amounts	s to the nearest d	market a settle production of the settle set					
1	Plan Assets and Liabilities:		(a) Beginnin				(b) End of Year
a	Total plan assets	1a	أنب الشار بسيرة شيشي	12	1760)8		1061662
b	Total plan liabilities							
C	Net plan assets (subtract line 1b from line 1a)	1c			1760	98		1061662
2	Income, Expenses, and Transfers for this Plan Year:		(a) Amo	ount		60	ony any and	(b) Total
а	Contributions received or receivable							
	(1) Employers				550.			4.00
	(2) Participants	2a(2)			679	18		
	(3) Others (including rollovers)							
b	Noncash contributions							
C	Other income		~~~~	-2	598	11		
d	Total income (add lines 2a(1), 2a(2), 2a(3), 2b, and 2c)		. 40					-136844
е	Benefits paid (including direct rollovers)	2e	apan Kaping Car		190	78		
f	Corrective distributions (see instructions)						10	
g	Certain deemed distributions of participant loans (see instruction				~,			
h	Other expenses			None	restation at	24		
į	Total expenses (add lines 2e, 2f, 2g, and 2h)							19102
j	Net income (loss) (subtract line 2i from line 2d)				100			-155946
k	Transfers to (from) the plan (see instructions)	2k						
3	Specific Assets: If the plan held assets at anytime during the plan as of the end of of the en	an year in any of t	he following cate	gori	es, ch	eck "Y	es" and	enter the current
	the assets of more than one plan on a line-by-line basis unless	the trust meets or	e of the specific	exce	ption	desc	ibed in	the instructions.
		······································			Yes	No		Amount
а	Partnership/joint venture interests					X		
b	Employer real property			-		Х		





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SUMMARY ANNUAL REPORT

FOR OTTAWA SAVINGS BANK EMPLOYEES' SAVINGS & PROFIT SHARING PLAN AND TRUST

This is a summary of the annual report for the Ottawa Savings Bank Employees' Savings & Profit Sharing Plan and Trust, EIN 36-1588740, Plan No. 003, for period January 1, 2008 through December 31, 2008. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Basic Financial Statement

Benefits under the plan are provided through a trust fund. Plan expenses were \$19,102. These expenses included \$19,078 in benefits paid to participants and beneficiaries and \$24 in other expenses. A total of 24 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was \$1,061,662 as of December 31, 2008, compared to \$1,217,608 as of January 1, 2008. During the plan year the plan experienced a decrease in its net assets of \$155,946. This decrease includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. The plan had total income of \$(136,844) including employer contributions of \$55,019, employee contributions of \$67,948, and earnings from investments of \$(259,811).

Your Rights To Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- 1. financial information; and
- 2. information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain a copy of the full annual report, or any part thereof, write or call Ottawa Savings Bank, 925 LaSalle Street, Ottawa, IL 61350, (815) 433-2525.

The plan has met the requirements to waive the annual examination and report of an independent qualified public accountant. As of the end of the plan year, the following regulated financial institution(s) held or issued plan assets that qualified under the waiver: INDIANA BANK & TRUST COMPANY \$1,061,662. You have the right, upon request of the Plan Administrator and without charge, to examine or receive copies of statements from the regulated financial institutions describing the qualifying plan assets. If you are unable to examine or obtain these documents, contact a EBSA Regional Office for assistance. Information about contacting EBSA regional offices can be found on the Internet at http://www.dol.gov/ebsa.

You also have the legally protected right to examine the annual report at the main office of the plan (Ottawa Savings Bank, 925 LaSalle Street, Ottawa, IL 61350) and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

SIGNATURES

Pursuant to the requirements of the other persons who administer the employee be signed on its behalf by the undersigned he	benefit 1	plan) have	duly caused this A	the trustees nnual Repo	s (or ort to
Date:			Bank Employees lan and Trust	' Savings	and
	Ву:	Plan Adm	n 18 BAOV inistrator		